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RECOMMENDATION FOR FUNDING FOR A SHORT-DURATION COUNTRY PROGRAMME**

Croatia

SUMMARY

The present document contains a recommendation for funding from supplementary funds for the country programme of Croatia for three years. The Executive Director recommends that the Executive Board approve the amount of $8,400,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the period 1996 to 1998.

* E/ICEF/1996/9.

** In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1995, will be contained in the "Summary of 1996 recommendations for general resources and supplementary funding programmes" (E/ICEF/1996/P/L.43 and Add. 1).

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BASIC DATA
(1994 unless otherwise stated)

Child population (millions, 0-15 years)	.99
U5MR (per 1,000 live births) (1993)	14
IMR (per 1,000 live births)	12
Underweight (% moderate and severe)	...
Maternal mortality rate (per 100,000 live births)	...
Literacy rate (% male/female)	../..
Primary school enrolment (% net, male/female)	../..
Primary school children reaching grade 5 (%)	100
Access to safe water (%)	..
Access to health services (%)	..
GNP per capita	$2,530
One-year-olds fully immunized against:	
tuberculosis:	92 per cent
diphtheria/pertussis/tetanus:	85 per cent
measles:	90 per cent
poliomyelitis:	85 per cent
Pregnant women immunized against:	
tetanus:	...

THE SITUATION OF CHILDREN AND WOMEN

1. The present situation of women and children in Croatia is marked by two crucial elements: (a) the transition to a market economy and a deep economic crisis; and (b) the impact of the war which continued throughout 1993 and 1994, when many Croatian towns were shelled regularly. In 1995, Croatian forces carried out two military actions and regained most of the territory that had been under the control of Croatian Serbs. The area was then reintegrated into the political and administrative system of the Government of Croatia. As a result, approximately 150,000 ethnic Serbs fled the so-called Krajina to neighbouring Bosnia and Herzegovina and the Federal Republic of Yugoslavia. However, a small part of Croatia (approximately 4 per cent) known as Eastern Slavonia, wealthy in oil and fertile land, still remains under the control of Croatian Serb forces. Negotiations carried out in September and October 1995 resulted in a general agreement and cease-fire and a plan for the peaceful return of Eastern Slavonia to the jurisdiction of the Government of Croatia.

2. The war and its consequences have had a devastating effect on the economy and the quality of life for most of the population. Factories, hospitals, churches, schools and other institutions were destroyed and hotels are inhabited by refugees and displaced people. Almost one third of Croatia's productive capacity, as well as to 20 per cent of the transportation network and a

substantial part of the electrical network, did not function for more than two years. In addition to tremendous financial debts, the burden of refugees and displaced persons has been enormous.

3. Assessments by UNICEF teams in the front-line cities show that children and mothers are at risk and in great need of additional medical, nutritional, sanitary and psycho-social care. Many children have suffered or witnessed horrifying and traumatic acts of violence and aggression. Teachers and parents have reported symptoms of post-traumatic stress disorder among alarmingly high numbers of children. For the fourth consecutive year, children have been exposed to declining standards of living which have affected their health, education, nutritional status and psychological state. A deteriorating economy has led to cuts in government expenditures for health, social services and education. As a consequence of these devastating socio-economic factors, the social infrastructure is heavily overburdened. The social safety net is overwhelmed by greatly increased numbers of beneficiaries. The health system also has been affected by the poor economic situation. There is a lack of funds to purchase medical supplies and materials, and the social welfare system is no longer able to assume the entire cost of hospitalization and medicines. Efforts to reform the health, education and social welfare systems are under way but serious obstacles remain to be addressed in the transformation process.

4. The Government plans to complete the return of approximately 190,000 people to the reintegrated areas. The returnees already find themselves in an extremely difficult situation because they are returning to destroyed homes, without social services to meet their basic needs. In addition, unexploded devices present an extreme danger to the returning population and to the children in those parts of the country which were directly affected by the war. The United Nations estimates that there could be as many as 3 million mines planted along the front lines.

PROGRAMME COOPERATION, 1994-1995

5. In response to the emergency situations in 1994-1995, UNICEF continued to provide support to women and children in the areas of health, nutrition, water and sanitation and psycho-social assistance. At the same time, responding to a request by the Government, UNICEF implemented a two-year programme of cooperation focusing on health, nutrition, education, children in especially difficult circumstances and child rights.

6. UNICEF-supported activities in the area of health aimed to reduce morbidity and mortality caused by acute respiratory infections (ARI) and diarrhoeal diseases, as well as the prevalence of infectious and parasitic diseases, especially among children living in poor sanitary conditions in communities with large numbers of refugees and displaced persons. Activities included the distribution of essential drugs kits, vitamin kits, maternal and child health kits and hygienic kits. UNICEF support for a continued vaccination campaign included the provision of vaccination supplies, cold-chain equipment and vaccines for the former United Nations Protected Areas.

7. Nutrition-related activities included support to a breast-feeding promotion campaign and activities focusing on discouraging the general use of infant formula. In conjunction with the Government and local authorities, programmes were initiated to eradicate micronutrient deficiencies (i.e., iodine, iron and vitamin).

8. Basic primary school and kindergarten services were strengthened by the supply of equipment and student and teacher kits. UNICEF also organized in-service training of teachers (i.e., on the psychology of effective learning) in war-affected areas to strengthen their capacity to meet the needs of students exposed to armed conflict, through a shortened curriculum and intermittent classes. Assistance to non-formal education covered mine awareness and conflict resolution. Psycho-social services were developed to help traumatized primary school children. Similar activities were organized for children in preschool institutions, refugee centres, public libraries and health institutions. the training of care providers and the development of simple skills to recognize traumatic symptoms remain the cornerstone of the programme. UNICEF supported mobilization to motivate policy makers, legislators, local government officials and religious leaders to include child rights and goals for children in their agendas. UNICEF encouraged the Government to start work on a national programme of action (NPA) for children and helped to formulate municipal plans of action in war-affected cities under the Mayors as Defenders of Children Initiative

RECOMMENDED PROGRAMME COOPERATION, 1996-1998

Estimated annual expenditure

(In thousand of United States dollars)

	1996	1997	1998	Total
Supplementary funds				
Health	880	725	570	2 175
Nutrition	300	245	195	740
Education	760	625	490	1 875
Children in especially difficult circumstances	600	495	390	1 485
Advocacy and social mobilization	180	150	115	445
Project support	680	560	440	1 680
Total	3 400	2 800	2 200	8 400

9. The programme strategy is to support the maintenance, improvement and sustainability of social services, capacity-building in the social sectors and strengthening of social planning, cost-effectiveness and service delivery. It also aims to empower families and communities to participate more effectively in the reconstruction and transition process. Priority will be given to women and

children in the most affected areas (9 of 22 counties and 30 cities). The Mayors as Defenders of Children Initiative will continue to play a dynamic and mobilizing role. As the programmes in Croatia are funded exclusively by supplementary funds, there was close collaboration with donors during the previous period. Some consultations have already taken place on the preparation of the new programme and continuous contacts will be pursued as the activities develop.

Cross-cutting strategies

10. The approach will be to achieve the goals for the decade as they are relevant to the Croatian context. The priority will be nationwide mobilization to achieve the goals of the World Summit for Children and the effective implementation of the Convention on the Rights of the Child. This mobilization effort will pursue the formulation of an NPA based on the World Summit Declaration. Creating a legislative basis for the NPA will be crucial in the next three years, as will raising awareness of legislators and decision makers and stimulating advocacy for this new ethic. The active participation of children themselves will be encouraged. The Subcommittee for the Rights of the Child of the Croatian Parliament will bolster the legislative process and initiate public forums to mobilize policy makers and decision makers for the ethic of "children first".

Health

11. The programme will emphasize improved quality of health service delivery, with a focus on family health. Families and households will be at the centre of all health actions. UNICEF will seek to improve the coverage, quality and efficiency of health service delivery and to build government capacity to manage the health sector under the new circumstances. Training will be organized on the rational use of essential drugs, including evaluation of current practices and the development of an essential drugs policy. There will be a focus on training medical staff and parents in the treatment, care and management of ARI according to internationally accepted protocols. The priority of the immunization programme will be to restore vaccination services in the reintegrated areas and halt the rise in the incidence of preventable diseases while ensuring high levels of immunization coverage nationwide. Additionally, UNICEF will aim to strengthen the national health information system in order to prevent and respond to major public health threats. UNICEF will help the Government to address the growing need for the introduction of health, nutrition and hygiene education in both the formal and non-formal education sectors and provide training to educators and health professionals.

Nutrition

12. The programme will focus on increasing the number of baby-friendly hospitals in the country. Breast-feeding will be promoted through more training, media campaigns and changed hospital practices. UNICEF will advocate the end of free distribution of infant formula in hospitals and maternity wards as well as the development of appropriate feeding practices for young children. Micronutrient deficiencies, such as vitamin A, iron and iodine, will be controlled and prevented among vulnerable groups. UNICEF intends to support the

development of a national nutrition policy through the creation of a multisectoral support group.

Education

13. The objective will be to ensure a quality education relevant to the needs of preschool and primary school children growing up in a country undergoing tremendous changes. As a strategy, UNICEF will support initiatives that address some of the problems brought on by the war: crowded classrooms; lack of supplies and teaching and learning materials; the absence of in-service training for teachers and school administrators; and the destruction of school facilities. UNICEF will continue to support and develop programmes in schools and local communities on mine awareness, environmental degradation and education for development focusing on conflict resolution, tolerance and child rights. UNICEF will encourage the establishment of a holistic early childhood development project. The project will focus not only on formal preschool education, in which merely 30 per cent of Croatian children are enrolled, but also on informal, intersectoral strategies which will be developed in consultation with the Government, parents, local child-care groups, non-governmental organizations (NGOs) and bilateral and multilateral agencies.

Children in especially difficult circumstances

14. UNICEF assistance will help the Government to plan and develop new policies for the most vulnerable children. The main challenge will be to incorporate new practices for care of children into existing services, as well as to develop a new multi-professional platform of cooperation at local and national levels. The Ministries of Education, Health and Social Welfare and the Offices for Victims of War and Displaced Persons and Refugees will remain the main partners in this undertaking. Efforts to increase capacity to care for war-traumatized children and women will continue through support to all relevant institutions and NGOs, with a special focus on the educational system. Continuous training and support to care providers within the Government and NGOs is essential to develop skills as well as to prevent the psychological exhaustion of service workers. Support will be provided to the Ministry of Social Welfare in developing new policies for the care of especially vulnerable children. Pilot projects will be supported for services for children in institutions and the development of non-institutional care for children with special needs.

Emergency preparedness plan

15. UNICEF will continue assistance to strengthen the capacity of government partners in early preparedness and response to sudden emergency situations through training, orientation and the provision of emergency supplies. Emergency kits for psycho-social rehabilitation already have been prepared by UNICEF and government partners. The kits and other emergency supplies will be positioned in the high-risk areas. Related training will be provided to local partners to ensure the proper use of these items. UNICEF will cooperate with the Office of the United Nations High Commissioner for Refugees, the World Food Programme and the World Health Organization and NGOs to coordinate its emergency response.

Monitoring and evaluation

16. Monitoring of the needs of the target population and of the impact of interventions will be conducted jointly by UNICEF staff and government counterparts on a regular basis. UNICEF will assist the Government in the development of monitoring tools and the training of concerned staff. There will be a formal mid-term review of programmes to allow for necessary adjustments. An evaluation will be carried out jointly with participating government organizations and other partners towards the end of the programme cycle. This will allow for the necessary lessons to be drawn and the main lines of future intervention to be prepared.

Programme support

17. The planning, implementation and monitoring of the proposed programme of cooperation will be done by the UNICEF office for Croatia. The office and staff will ensure coordination with other United Nations agencies, NGOs and bilateral donors to avoid duplication.